## FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

**LIMITED PARTNERSHIP ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A23053

SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC 26 PM 2: 27



<b>PIONEER WESTERN PROPERTIES INCOME FUND LIMITED P</b> <b>ARTNERSHIP</b>			P	E E A STATE OF THE STATE AND STATE OF THE ST			
				91/1	50 o		
Malling Address	Principal Office Address	Principal Office Address		Date Formed or Registered     Sa. Capital Contributions as Shown on record.		tal Contributions as vn on record.	
9001 EXECULTIVE DRIVE	3001 EXECUUTIVE DRIVE		08/14/1986 3a. Date of Last Report	<b>PE FO7 0FO 00</b>			
260	260				\$5,567,250.00		
CLEARWATER FL <del>94022 -</del> 33'76' L	CLEARWATER FL 04022	33.76 >-		03/12/1997	5b. Amount of Capital Contributions in FLORIDA to date:		
2. Malling Address		2a. Principal Office Address		4. State or Country of Formation			
Z. Mailing Address	Za. Principal Office Address	Zo. Fincipal Office Address		FL			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number	1	f:h	
Otto B Octo	02.0004			59-2703685	Applied For  Not Applicable		
City & State	City & State	City & State		7. Certificate of Status Desired	F 13	\$8.75 Additional	
Zip Country	Zip Country				Fee Required		
				8. Make check payable to: Dept. of	State (See rev	rerse side for fee informati	
9. Name and Address of Currer	It Registered Agent			10. If changed, new Registere	ed Agent/Office		
PIONEER WESTERN PROPERTIES CORPORATION 3001 EXECULTIVE DRIVE 260 CLEARWATER FL 94022- 33762		Name					
		Street Address (P.O. Box Number Is Not Acceptable)					
		Suite, Apt. #, etc					
		City			FL	Zip Code	
10a. Pursuant to the provisions of sections 620.1051 at for the purpose of changing its registered office of agent. I am familiar with, and accept the obligation SIGNATURE (Registered Agent Accepting Appointment).	rregistered agent, or both, in the State of				eby accept the		
A GENERAL PARTNER THAT	IS A CORPORATION T BE REGISTERED A	I, LIMITED	PART /E WIT	NERSHIP OR OTHE		NESS ENTITY	
Name(s) of General Partner(s)	11a. Address of Each Ge (Do NO? Use Post Office	eneral Partner de Box Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number	
PIONEER WESTERN PROP. CORP.	3001 EXECULTIVE DRIVE		CLEARWATER FL <del>34622 -</del> 33762		G43119		
•				600002 -01/08 *****	1394 3798-0 341.25	256	
•							

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further cortify that I am a General Partner of the limited partnership, receiver or trustee

CLOWELL

Daytmo Telephone Number (813) 5 73 - 1201